



For the year Jan. 1 - Dec. 3	31, 2007	or other tax year: Beginning: Ending: ●									
Your social security number		Spouse's SSN if joint return									
•		•									
Your first name		Initial Last name									
Spouse's first name		Initial Last name									
Present home address (nur	mber an	d street or P.O. Box number)									
City town or post office		State ZIP code									
City, town or post office		State ZIF CODE		USE	BL	ACK IN	к то с	OMPL	ETE	RETUR	N
Filing Status/ Exemptions		● ☐ \$1,500 Single 3 ● ☐ \$1,500 Married filin			SSN						
	2										
	5	Wages, salaries, tips, etc. (list each employer and address separately,	·).			— Alabam	na tax with	1	_	В-	- Income
Incomo	a				5a			00	5a		00
Income and	b				5b	•		00	5b		00
	C				5c	•		00	5c		00
Adjustments	d				5d			00	5d	_	00
	6	Interest and dividend income. If over \$1,500.00, use Form 40							6	•	00
Dadaatiaaa	7	Total income. Add lines 5a through 5d and 6 (column B)							7	•	00
Deductions You Must Attach page	8	Standard Deduction (enter amount from table on page 8 of instruction.		-	8	•		00			
2 of Federal Form	9	Federal tax deduction (see instructions)			•	_					
1040, Federal Form 1040A, Federal Form	40	DO NOT ENTER THE FEDERAL TAX WITHHELD FROM YOUR FO	` '	-	9	•		00			
1040NR, or page 1 of Form 1040EZ, if claim-	10	Personal exemption (from line 1, 2, 3, or 4)				•		00			
ing a deduction on line	11	Dependent exemptions (from page 2, Part II, line 2)						00			
9.	12	Total deductions. Add lines 8, 9, 10, and 11.							12		00
	13	Taxable income. Subtract line 12 from line 7. Enter the result							13	•	00
	14								14	•	00
Tax and	15	Consumer Use Tax (use worksheet on page 9)				_			15	•	00
Payments Payments	16	You may make a voluntary contribution to: a Alabama Democratic P				_			16a		00
•		b Alabama Republican Pa							16b		00
	17	Total tax liability and voluntary contribution. Add lines 14, 15, 16a.							17	•	00
AMOUNT	18	Alabama income tax withheld. Add lines 5a thru 5d, column A							18	•	00
AMOUNT	19	If line 17 is larger than line 18, subtract line 18 from line 17, and enter AMOUNT YOU OWE.									
YOU OWE		Place payment, along with Form 40V, loose in the mailing envelope. (F			NY P	AYMENT	.) 19			1	00
OVERPAID	20	If line 18 is larger than line 17, subtract line 17 from line 18 and enter	amount OVERPAID)					20	•	00
Donation Check-offs											
Check-ons	21	Total Donation Check-offs from page 2, Part IV, line 2							21	•	00
REFUND		REFUNDED TO YOU. Subtract line 21 from line 20.									
	22	(You MUST SIGN this return before your refund can be processed.)							22	•	00
		I authorize a representative of the Department of Revenue to	discuss my return	and attach	ments	s with my	preparer.				
Sign Here In Black Ink		Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.									
III DIAOK IIIK		Your signature Date Daytime telephone number Your						ur occur	nation		
Keep a copy of this return		• I signature	Jaic	/ N	лорп	Jile Hailib		ui occup	σαιιστί		
for your records.		Spouse's signature (if joint return, BOTH must sign)	Date	Daytime to	lanho	nne numh	er Sn	ouse's c	occupa	ation	
•		>	Juio	/ Dayline le	, opii	JIIG HUHID	ο, ορ	ouse s t	ooupo	2011	
		Preparer's signature		Date			011-11		1	Prenarer's	SSN or PTIN
		> lopaio. 9 olymaturo		Dato			Check if self-emplo	oyed			, 5514 OLT TIIV
Paid		Firm's name (or yours if self-employed)		Daytime to	lenha			. No.			
Preparer's		o namo (or youro ii oon ompioyou)		()	piil	o mumb	٠٠ ^١ -٠١				
Use Only		Address		()			715	² Code			
							-"				

Form 40	A (200	7)						Pag
PART I	1	Were you (and your spouse, if marri-		-			. Yes	□No
		If you checked no, DO NOT COMPL						□
	2	Did you file an Alabama income tax	•				. L Yes	□No
	3	If you checked no, state the reason to Give name and address of your pres	•					
	3							
General		Your Spouse						
Information	4	Your occupation		Spouse's occ	upation			
All Taxpayers	5	Enter the Federal Adjusted Gross In						
lust Complete		Federal Individual Income Tax Retu	rn.				·	•
his Section	6	Do you have income which is reported	ed on your Federal return, but	not reported on your Al	abama return?		. 🗆 Yes	☐ No
		If yes, enter source(s) and amount(s	below (other than state incor	ne tax refund):				
		Source				Am	ount \$	
		Source				Am	ount \$	
		Source				Am	ount \$	
							(0.50)	10
PART II	1a	Dependents: (1) First name	Last name		(2) Dependent's social security number.	(3) Dependent's relationship to you.	(4) Did you provid more than one-hadependent's suppo	alf
	1a	Dependents: (1) First name		•			more than one-ha	alf
Dependents	1a	Dependents:		•			more than one-ha	alf
Dependents Do not include	1a	Dependents: (1) First name		•	number.		more than one-ha	alf
Dependents Do not include ourself or	1a	Dependents: (1) First name		•	number.	relátionship to you.	more than one-hadependent's suppo	alf
PART II Dependents Do not include rourself or rour spouse	1a b 2	Dependents: (1) First name	d above	•	number.	relátionship to you.	more than one-hadependent's suppo	alf

PART III

Federal Tax Liability If you filed a 2007: Form 1040EZ - Enter the amount from line 10 and attach a copy of your Form 1040EZ, page 1.

Form 1040A — Enter the amount from line 37 and attach a copy of your Form 1040A, page 2.

Enter amount here and on page 1, line 11

Form 1040 — Enter the amount from line 57, plus any amount on line 60 and attach a copy of your Form 1040, page 2.

Form 1040NR — Enter the amount from line 52, plus any amount on line 55 and attach a copy of your Form 1040NR, page 2.

PART IV

Deduction

Donation Check-offs

1 You may donate all or part of your overpayment. (Enter the amount in the appropriate boxes.)

500

300

а	Senior Services Trust Fund	•	00	i	Mental Health
b	Alabama Arts Development Fund	•	00	j	Neighbors Helping Neighbo
С	Alabama Nongame Wildlife Fund	•	00	k	Alabama Breast & Cervical
d	Child Abuse Trust Fund	•	00	ı	Alabama 4-H Club
е	Alabama Veterans Program	•	00	m	Alabama Organ Center Do
f	Alabama Indian Children's Scholarship Fund	•	00	n	Alabama National Guard F
g	Penny Trust Fund	•	00	0	Cancer Research Institute.
h	Foster Care Trust Fund	•	00	р	Alabama Alternative Fuels
				,	

1	Mental Health	00	
j	Neighbors Helping Neighbors	00	
k	Alabama Breast & Cervical Cancer Program	00	
ı	Alabama 4-H Club	00	
m	Alabama Organ Center Donor Awareness Fund	00	
n	Alabama National Guard Foundation Incorporated .	00	
_	Cancer Research Institute	00	

2

Total Donations. Add lines 1a, b, c, d, e, f, g, h, i, j, k, l, m, n, o, and p. Enter here and on page 1, line 21......

If an addressed envelope came with your return, please use it and follow the instructions on the envelope. If you do not have one, mail your return to one of the addresses below.

If you are not making a payment, mail your return to:

If you are making a payment, mail your return, Form 40V, and payment to:

WHERE TO FILE FORM 40A

If you are not making a payment, mail your return to:
Alabama Department of Revenue
P. O. Box 327465

20,000 - 100,000

Over 100,000

Alabama Department of Revenue P. O. Box 327477 Montgomery, AL 36132-7477

Montgomery, AL 36132-7465 Montgomery, AL 36132-7477

Mail only your 2007 Form 40A to one of the above addresses. Prior year returns, amended returns, and all other correspondence should be mailed to Alabama Department of Revenue, P.O. Box 327464, Montgomery, AL 36132-7464.

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